								- 4	Application or Docket Number				
	PATENT	ORD	10015878										
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	. ·	OTHE	R THAN ENTITY	
TOTAL CLAIMS			1/1	)	T -		R		FEE	٦ ً	RATE	FEE	
FOR			NUMBER FILED		NUMI	MBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			//2 minus 20=		. 2	2		X\$ 9=	199	1	X\$18=		
INDEPENDÊNT CLAIMS			3 minus 3 =		1		·	. X43≠	1,00	OR	X86=		
M	JLTIPLE DEPE	NDENT CLAIM F	/						<del>                                     </del>	OR	<del>                                     </del>		
• "	i the difference	- in ant d in	less than your color "O" in column 2				+145=	1200	OR	+290=	i		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1213	OR	TOTAL	L	
1	2/2/05	CAIMS AS (Column 1)		- PART II (Column 2) (Column 3)			SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F		PRESENT EXTRA		RATE	ADDI- TIONAL FEE	]	RATE	ADDI- TIONAL FEE	
	Total	.43	Minus	42	<u>Ş</u> .	=		X\$ 9=		OR	Xana=	100	
\ME	Independent	. 3	Minus			F	ŀ	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b>	+145=		1	+290=		
							L	TOTAL		OR	TOTAL	ízzo	
		(Column 1)		· (Colum		(Column 3)	A	DOIT. FEE	L	JOR .	ADOIT. FEE	400	
	······	(Column 1)	T	HIGHE		(Column 3)	Г	<del></del>	ADDI-	1 1		ADDI-	
ŽΙ	•	REMAINING AFTER	j	PREVIO	ŲSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	AMENDMENT	Minus	PAIDF	J.	=		X\$ 9=	FEE	20	X\$18=	FEE	
	Independent	•	Minus		3	=	-	<del></del>	· ·	OR	<del></del>		
ই	FIRST PRESE	NTATION OF MI	JLTIPLE DE	LTIPLE DEPENDENT CLAIM			-	X43=	<u> </u>	OR	X86=		
		•					L	+145=		OR	+290=		
•	•							TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)			•				
ر ا		CLAIMS REMAINING AFTER		HIGHE NUMBI PREVIOL	ER .	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Ę.	·	AMENDMENT		PAID F	OR I	· -	` <b> </b> -		FEE	ŀ		FEE	
AMENOMEN	Total- ····	¥	Minus" "	- A				X\$ 9=		ÖR	X\$18=		
£	Independent	ATATION OF M	Minus	CALDENT (		-		X43=		OR	X86=	·	
ــــــــــــــــــــــــــــــــــــــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEEOH ADDIT FEEO													
Th	ne "Highes! Numt	er Previously Paid	For" (Total or	Independent	I) is the l	highest number	lound	in the app	ropriate box	ın colu	MA I.	1	